

County: Douglas
MIDDLE RIVER HEALTH CARE CENTER
8274 EAST SAN ROAD

Facility ID: 5600

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SOUTH RANGE 54874 Phone:(715) 398-3523
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 102
Total Licensed Bed Capacity (12/31/02): 102
Number of Residents on 12/31/02: 98

Ownership: Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 100

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No					1 - 4 Years		27.6
Supp. Home Care-Personal Care	No					More Than 4 Years		43.9
Supp. Home Care-Household Services	No	Developmental Disabilities	2.0	Under 65	3.1			28.6
Day Services	No	Mental Illness (Org./Psy)	55.1	65 - 74	5.1			-----
Respite Care	No	Mental Illness (Other)	5.1	75 - 84	31.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	55.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	12.2	65 & Over	96.9	-----		
Transportation	No	Cerebrovascular	9.2		-----	RNs		9.2
Referral Service	No	Diabetes	3.1	Sex	%	LPNs		8.1
Other Services	Yes	Respiratory	2.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	8.2	Male	28.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	71.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			4	4.5	129	0	0.0	0	1	12.5	160	0	0.0	0	0	0.0	0	5	5.1
Skilled Care	1	100.0	230			81	91.0	110	0	0.0	0	7	87.5	130	0	0.0	0	0	0.0	0	89	90.8
Intermediate	---	---	---			2	2.2	91	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.0
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			2	2.2	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0				89	100.0		0	0.0		8	100.0		0	0.0		0	0.0		98	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02								

Percent Admissions from:		Activities of		%	% Needing Assistance of		% Totally		Total	
		Daily Living (ADL)		Independent	One Or Two Staff		Dependent		Number of Residents	
Private Home/No Home Health		4.8	Bathing		0.0	79.6		20.4		98
Private Home/With Home Health		11.1	Dressing		3.1	80.6		16.3		98
Other Nursing Homes		11.1	Transferring		39.8	51.0		9.2		98
Acute Care Hospitals		65.1	Toilet Use		27.6	50.0		22.4		98
Psych. Hosp.-MR/DD Facilities		0.0	Eating		42.9	40.8		16.3		98
Rehabilitation Hospitals		0.0	*****							
Other Locations		7.9	Continence			% Special Treatments				%
Total Number of Admissions		63	Indwelling Or External Catheter			2.0		Receiving Respiratory Care		3.1
Percent Discharges To:			Occ/Freq. Incontinent of Bladder			54.1		Receiving Tracheostomy Care		0.0
Private Home/No Home Health		14.1	Occ/Freq. Incontinent of Bowel			35.7		Receiving Suctioning		0.0
Private Home/With Home Health		21.9	Mobility					Receiving Ostomy Care		2.0
Other Nursing Homes		6.3	Physically Restrained			12.2		Receiving Tube Feeding		2.0
Acute Care Hospitals		9.4						Receiving Mechanically Altered Diets		14.3
Psych. Hosp.-MR/DD Facilities		0.0	Skin Care					Other Resident Characteristics		
Rehabilitation Hospitals		0.0	With Pressure Sores			9.2		Have Advance Directives		95.9
Other Locations		0.0	With Rashes			17.3		Medications		
Deaths		48.4						Receiving Psychoactive Drugs		65.3
Total Number of Discharges										
(Including Deaths)		64								

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities										

		This Facility	Ownership: Proprietary		Bed Size: 100-199		Licensure: Skilled		All	
		%	% Ratio		% Ratio		% Ratio		Facilities	
									% Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds		98.0	84.7	1.16	85.7	1.14	85.3	1.15	85.1 1.15	
Current Residents from In-County		81.6	81.6	1.00	81.9	1.00	81.5	1.00	76.6 1.07	
Admissions from In-County, Still Residing		33.3	17.8	1.88	20.1	1.66	20.4	1.63	20.3 1.64	
Admissions/Average Daily Census		63.0	184.4	0.34	162.5	0.39	146.1	0.43	133.4 0.47	
Discharges/Average Daily Census		64.0	183.9	0.35	161.6	0.40	147.5	0.43	135.3 0.47	
Discharges To Private Residence/Average Daily Census		23.0	84.7	0.27	70.3	0.33	63.3	0.36	56.6 0.41	
Residents Receiving Skilled Care		95.9	93.2	1.03	93.4	1.03	92.4	1.04	86.3 1.11	
Residents Aged 65 and Older		96.9	92.7	1.05	91.9	1.06	92.0	1.05	87.7 1.11	
Title 19 (Medicaid) Funded Residents		90.8	62.8	1.45	63.8	1.42	63.6	1.43	67.5 1.35	
Private Pay Funded Residents		8.2	21.6	0.38	22.1	0.37	24.0	0.34	21.0 0.39	
Developmentally Disabled Residents		2.0	0.8	2.56	0.9	2.22	1.2	1.73	7.1 0.29	
Mentally Ill Residents		60.2	29.3	2.06	37.0	1.63	36.2	1.66	33.3 1.81	
General Medical Service Residents		8.2	24.7	0.33	21.0	0.39	22.5	0.36	20.5 0.40	
Impaired ADL (Mean)		47.3	48.5	0.98	49.2	0.96	49.3	0.96	49.3 0.96	
Psychological Problems		65.3	52.3	1.25	53.2	1.23	54.7	1.19	54.0 1.21	
Nursing Care Required (Mean)		6.0	6.8	0.88	6.9	0.87	6.7	0.89	7.2 0.83	